

Arizona State Mine Inspector Notice of Move, or Stop For Mine Operations

State 1.D		MSHA ID#		
Company Name	e:			
Address:				
		Zip:		
Phone:		Fax:		
Email Address:				
Emergency, Ho	liday or Weeker	nd Phone Number: _		
Mine or Plant N	Jame:			
Location of Site	»:			
٦	Γownship:	Range:	Section:	
7	Γownship:		Section:	
In compliance w	written notice to	d 27 of the Arizona A the State Mine Insp	dministrative Code, we are ector and / or the Departme	
Move Date:				
Stop Date:				
Today's Date: _				